

IN THE UNITED STATES DISTRICT COURT
FOR THE BOSTON DISTRICT OF MASSACHUSETTS

David L. GUIDRY
Plaintiff
Pro-Se

vs

United States of America

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Case No.

04-40154

DPW

MOTION FOR LEAVE TO PROCEED
IN FORMA PAUPERIS

COMES NOW David L. GUIDRY, Prison Number 85957-001, who is the Plaintiff in the above entitled cause and movant herein, who, himself, pro-se, respectfully moves the Court for leave to proceed in forma pauperis in all matters and appeals relating to the motions herewith.

Respectfully presented on this, the 7 day of 8
2004.

David L. GUIDRY
David L. GUIDRY
Reg. No. 85957-001
FMC Devens
P.O. Box 879
Ayer, MA 01432

UNITED STATES DISTRICT COURT

Eastern
David Guidry

Plaintiff

District of

*California*APPLICATION TO PROCEED
WITHOUT PREPAYMENT OF
FEES AND AFFIDAVIT*State of California, U.S.A.*
David L. Winn, Warden,
F.M.C. Devers
DefendantCASE NUMBER: **04-40154**I, *David Guidry (85-957-011)* declare that I am the (check appropriate box)☐ petitioner/plaintiff/movant☐ other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915 I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? ☒ Yes ☐ No (If "No," go to Part 2)If "Yes," state the place of your incarceration *Fed Med Center Devers*Are you employed at the institution? *No* Do you receive any payment from the *No*

Attach a ledger sheet from the institution(s) of your incarceration showing at least the past six months' transactions.

2. Are you currently employed? ☐ Yes ☒ No

a. If the answer is "Yes," state the amount of your take-home salary or wages and pay period and give the name and address of your employer.

b. If the answer is "No," state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer.

See Prison and Court Records

3. In the past 12 twelve months have you received any money from any of the following sources?

- | | | |
|---|---|--|
| a. Business, profession or other self-employment | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| b. Rent payments, interest or dividends | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| c. Pensions, annuities or life insurance payments | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| d. Disability or workers compensation payments | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| e. Gifts or inheritances | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| f. Any other sources | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

If the answer to any of the above is "Yes," describe, on the following page, each source of money and state the amount received and what you expect you will continue to receive.

Inmate Inquiry


Inmate Reg #: 85957011
Inmate Name: GUIDRY, DAVID
Report Date: 08/06/2004
Report Time: 9:59:17 AM

Current Institution: DEVERENS FMC
Housing Unit: N UNIT
Living Quarters: N04-40219

2004 AUG 10 10 21 AM

General Information | Account Balances | Commissary History | Commissary Restrictions | Comments

General Information

Administrative Hold Indicator: No
No Power of Attorney: No
Never Waive NSF Fee: No
Max Allowed Deduction %: 100
PIN: 1520
FRP Participation Status: ExemptTmp
Arrived From: SPG
Transferred To:
Account Creation Date: 5/29/2002
Local Account Activation Date: 3/19/2004 6:04:06 AM
Sort Codes: 
Last Account Update: 8/5/2004 12:14:54 PM
Account Status: Active
ITS Balance: \$0.30

FRP Plan Information

FRP Plan Type	Expected Amount	Expected Rate
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Account Balances

Account Balance:	\$0.07
Pre-Release Balance:	\$0.00
Debt Encumbrance:	\$0.00
SPO Encumbrance:	\$0.00
Other Encumbrances:	\$0.00

Jalal Al-Qaderi, Unit 24
 8/6/04

Outstanding Negotiable Instruments: \$0.00
Administrative Hold Balance: \$0.00
Available Balance: \$0.07
National 6 Months Deposits: \$310.00
National 6 Months Withdrawals: \$358.85
National 6 Months Avg Daily Balance: \$12.71
Local Max. Balance - Prev. 30 Days: \$41.82
Average Balance - Prev. 30 Days: \$18.82

Commissary History

Purchases

Validation Period Purchases: \$79.95
YTD Purchases: \$284.65
Last Sales Date: 8/5/2004 12:14:54 PM

SPO Information

SPO's this Month: 0
SPO \$ this Quarter: \$0.00

Spending Limit Info

Spending Limit Override: No
Weekly Revalidation: No
Spending Limit: \$290.00
Expended Spending Limit: \$76.25
Remaining Spending Limit: \$213.75

Commissary Restrictions

Spending Limit Restrictions

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Restricted Spending Limit: \$0.00

Restricted Expended Amount: \$0.00

Restricted Remaining Spending Limit: \$0.00

Restriction Start Date: N/A

Restriction End Date: N/A

Item Restrictions

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List Name	List Type	Start Date	End Date	Userid	Active
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Comments

Comments:

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8/6/2004